24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)	PAGE 1 OF 3 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
New Prosperity Foundation; The	C C00488494	
Check If X 24-hour report 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y	
Full Name (Last, First, Middle Initial) of Payee XPS Professional Services	Date	
Mailing Address 220 E Adams St	10 29 2012	
Suite 200	Amount	
City State Zip Code Springfield IL 62701	1292.97	
1	Fransaction ID : SE.4975 Sought: House State: IL Senate District: 11	
Name of Federal Candidate Supported or Opposed by Expenditure: G. WILLIAM (BILL) FOSTER Check	President Pres	
Calendar Year-To-Date Per Election for Office Sought 207730.92 Disbut 2012	orsement For: Primary General Other (specify)	
Full Name (Last, First, Middle Initial) of Payee XPS Professional Services	Date 10 29 2012	
Mailing Address 220 E Adams St	Amount	
Suite 200 City State Zip Code	7 Miloum	
Sprinafield IL 62701	1464.82 Transaction ID : SE.4976	
	Senate District: 13 President	
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID MICHAEL GILL Check	k One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought Disbu 218668.75	Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	2757.79	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Gregory Baise [Electronically Filed] Date 10	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Signature		

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)	PAGE 2 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
New Prosperity Foundation; The	C C00488494
Check If 24-hour report 48-hour report New report Amends repo	rt filed on
Full Name (Last, First, Middle Initial) of Payee	5.
XPS Professional Services	Date M M D D / Y Y Y Y Y Y Y Y Y
Mailing Address 220 E Adams St	10 29 2012
Suite 200	Amount
City State Zip Code	1452.57
Springfield IL 62701	Transaction ID : SE.4977
Purpose of Expenditure Voter Telephone Contact (also supports Dold) Category/ Type	Office Sought: House State: IL Senate District: 10
Name of Federal Candidate Supported or Opposed by Expenditure:	President
BRADLEY SCOTT SCHNEIDER	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)
Full Name (Last, First, Middle Initial) of Payee XPS Professional Services	Date 10 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 220 E Adams St	
Suite 200	Amount
City State Zip Code Springfield IL 62701	1204.84
Purpose of Expenditure Voter Telephone Contact (also supports Plummer) Category/ Type	Office Sought: House State: IL Senate District: 12
Name of Federal Candidate Supported or Opposed by Expenditure:	President
WILLIAM L JR ENYART	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	2657.41
(b) SUBTOTAL of Unitemized Independent Expenditures	
	7 7
(c) TOTAL Independent Expenditures	>
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Gregory Baise [Electronically Filed] Date	10 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)	PAGE 3 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
New Prosperity Foundation; The	C C00488494
Check If 24-hour report 48-hour report New report Amends repo	rt filed on
Full Name (Last, First, Middle Initial) of Payee	_
XPS Professional Services	Date M M D D / Y Y Y Y Y Y Y Y Y
Mailing Address 220 E Adams St	10 29 2012
Suite 200	Amount
City State Zip Code	1359.26
Springfield IL 62701	Transaction ID : SE.4979
Purpose of Expenditure Voter Telephone Contact (also supports Schilling) Category/ Type	Office Sought: House State: IL Senate District: 17
Name of Federal Candidate Supported or Opposed by Expenditure:	President
CHERI BUSTOS	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee XPS Professional Services	Date 10 / 29 / 2012
Mailing Address 220 E Adams St	
Suite 200	Amount
City State Zip Code Springfield IL 62701	1316.84 Transaction ID : SE.4980
Purpose of Expenditure Voter Telephone Contact (also supports Walsh) Category/ Type	Office Sought: House State: IL Senate District: 08
Name of Federal Candidate Supported or Opposed by Expenditure:	President
L. TAMMY DUCKWORTH	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	2676.10
(b) SUBTOTAL of Unitemized Independent Expenditures	. •
(c) TOTAL Independent Expenditures	8091.30
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Gregory Baise [Electronically Filed] Date	10 30 2012
Signature	